EARLY INTERVENTION SERVICES
Effective Date: 11-07-2020

I. PURPOSE

The RWHAP legislation defines Early Intervention Services (EIS) for Parts A, B, and C. See § 2651(e) of the Public Health Service Act providing guidance as to what is allowable for Early Interventions Services (EIS).

II. DEFINITION

Funds awarded under this service category may be used to support early detection of HIV, to help prevent or delay the onset of AIDS. EIS are comprised of four key components: 1) HIV Testing and Targeted Counseling, 2) Referral Services, 3) Linkage to Care, and 4) Health Education and Literacy Training that enables clients to navigate the HIV system of care. All four components must be present; Part B funds for HIV testing are to be used as necessary to supplement, not supplant, existing funding.

III. PROGRAM GUIDANCE

The overall objectives of the EIS standards of care are to:

- Help clients who are unaware of their HIV status learn their status and receive either a referral to prevention services or referral and linkage to HIV care services.

- Create linkage agreements (MOU/MOA) and make referrals; work with key points of entry to create connections between services; providing referral to additional services to meet immediate needs.

- Identification of Primary Medical Care provider. Also, may include referral to Medical Case Management; Entry into Substance Abuse Treatment; and/or Treatment Adherence Counseling.

- Provide education on the HIV service delivery system; how to work with your clinicians; how to handle problems and issues; disease progression and managing life with HIV disease.

- Providers of EIS shall adhere to all universal standards of care.

The elements of EIS often overlap with other service category descriptions; however, EIS is the combination of such services rather than a stand-alone service. RWHAP Part recipients should be aware of programmatic expectations that stipulate the allocation of funds into specific service categories.

RWHAP Parts A and B EIS services must include the following four components:

1. Targeted HIV testing to help the unaware learn of their HIV status and receive referral to HIV care and treatment services if found to be HIV-infected

   o Recipients must coordinate these testing services with other HIV prevention and testing programs to avoid duplication of efforts

o HIV testing paid for by EIS cannot supplant testing efforts paid for by other sources

2. Referral services to improve HIV care and treatment services at key points of entry

3. Access and linkage to HIV care and treatment services such as HIV Outpatient/Ambulatory Health Services, Medical Case Management, and Substance Use Disorder Care

4. Outreach Services and Health Education/Risk Reduction related to HIV diagnosis

All service provision will comply with the Department of Health and Human Services (HHS) Guidelines and the Alabama Department of Public Health (ADPH) Service Standards for people living with HIV.

APPENDIX A: HIV/AIDS BUREAU, DIVISION OF STATE HIV/AIDS PROGRAMS NATIONAL MONITORING STANDARDS FOR RYAN WHITE PART B GRANTEES: PROGRAM – PART B

Quality Management
National Monitoring Standards: Implement a Clinical Quality Management Program (CQM) to include: a) written QM plan; b) quality expectations for providers and services; c) method to report and track expected outcomes; d) monitoring of provider compliance with HHS treatment guidelines and Part B Program's approved Standards of Care.

Standard	Measure
1.1) Measure and report client health outcomes using Early Intervention Services (EIS) measures approved by ADPH.	1.1) Performance measurement data on the following indicators: • Percentage of people enrolled in RW Part B-funded Program living with HIV regardless of age and receiving EIS services, who will have at least one care marker* in a 30-day period. *Care marker defined as evidence of a HIV medical care visit date, a CD4 count and test date, a viral load value and test date, and/or an antiretroviral medication prescription and date*

HRSA HAB National Monitoring Standards link: https://hab.hrsa.gov/sites/default/files/hab/Global/programmonitoringpartb.pdf